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C O N T E N T S

FOR THE DEGREE OF BACHELOR OF DIVINITY

A Special Study of the Relationship of Religious Education to the Problem Child

Floyd Samuel Bailey

Ancient Israelitish Beliefs Concerning the Future Life

Donald Foulk Gaylord

Socialism and Religion

P'ei Yu Li

The Renaissance of Jesus in India

Thomas John

Woman in the Early Church

Nobundo Oda

Thomas Cranmer and his Place in the Reformation

Bertil William Selin

Title

A Special Study of the Relationship of Religious Education to the Problem Child

By

Floyd Samuel Bailey

A.B. Willamette University, 1927

M.A. Pacific School of Religion, 1930

Thesis

Submitted to the Department of Religious Education in partial fulfillment of the requirements for the degree of Bachelor of Divinity in Pacific School of Religion, 1931

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SYNOPSIS

A SPECIAL STUDY OF THE RELATIONSHIP OF RELIGIOUS EDUCATION TO THE PROBLEM CHILD

I. A Definition of terms is necessary to an understanding of the thesis.

A. By Religious Education is meant: The direct process of helping people to develop progressively those habits, skills, attitudes, knowledge, appreciations, and ideals which will enable them at each stage of their progress to achieve an even more integrated personality, and to live complete and satisfying lives in their physical environment and as co-operative members of an ongoing and improving human society.

B. By the problem child is meant the child who has acquired a set mental attitude of some type. A mental attitude that does not conform to the accepted idea of a well balanced life, but which may be changed if properly dealt with at an early stage of its development.

C. The normal child is the child who conforms to the standard principles of conduct as ascribed by society whereas the problem child markedly deviated from these

accepted principles.

II. In a general grouping there may be said to be three types of problem children.

A. One of the most common types is that of the mentally deficient child.

1. Those children who are unable to conform to the usual routine of mental life are called feeble-minded.

2. The cases in which the mental deficiency is not very marked are called morons.

3. Feeble-minded cases in the extreme are beyond recovery and should be segregated.

4. The moron cases should be carefully studied and given special treatment and instruction in order to build for them if possible a complete mental equipment.

B. Psychopathic cases form the majority of cases found in problem children.

1. The psychopathic case is one in which there is some form of comparatively mild mental disturbance which can be cured if proper treatment is given in the early stages of the disturbance.

2. In the psychopathic type is found the child who is continually day dreaming.
3. The child who shuts himself up inside and does not give way to his real emotions or give vent to his real personality is a psychopathic case. Dementia Praecox.
4. Children who have a constant feeling of inferiority are psychopathic cases.

C. Another type is the child who becomes a problem because of home environment.

1. Problem children as a result of unadjusted life in the foster family are common.
2. The problem child may be the result of parental employment under which condition the child is left without supervision.
3. Broken homes are often the cause on which the child's difficulty rests.

III. The relation of Religious Education to the problem child is a matter to be worked out by every pastor and Director of Religious Education.

A. In general the pastor or Director of Religious Educa-

tion will follow the same lines of procedure as that used by the psychiatrist or the visiting teacher.

1. Methods of the psychiatrist.
2. Methods of the visiting teacher.
3. What can religion add to these methods?
4. What is the present program of Religious Education doing for the problem child?

B. What can Religion do for that type of problem child who is mentally deficient?

1. Make a careful study of the case history and determine definitely that the child is mentally deficient.
2. Give several mental tests.
3. Have numerous conversations with the child in a friendly way. Personal counseling system.
4. Try to build up a personal devotional life which will bring a certain peace of mind.
5. Call in medical authorities for advice and co-operation.

C. How can Religion help to bring back to normal those individuals who are suffering from some form of psy-

chopathy?

1. Make a careful study of each case and its history and determine the original cause of the disorder.
2. Win the confidence of the individual through personal contact and friendship. (Personal counseling system).
3. Through your friendship lead the individual into trust in God and a personal relationship with Jesus through prayer.
4. Remember that each individual has a different personality and a different problem and so vary your approach. Keep in mind that prayer and private devotion clear the mind of many troubles if the approach can be accomplished.

D. Can the Pastor and Director of Religious Education help those cases of problem children which are the result of home environment?

1. Make a careful study of the history of the case and determine the cause of the disorder.
2. Change the home environment and the attitude of the parents through parental education.
3. Try to make the church and religion a vital

factor in the lives of the parents.

4. Use the personal counseling system with the problem child always trying to bring into his life a vital religious experience.
5. Teach the individual how to worship and what to expect in co-operate worship.

IV. Conclusion.

A Special Study of the Relationship of Religious Education to the Problem Child.

-Introduction-

In almost every group of individuals there are those who are commonly looked upon as different, queer, peculiar, or non-conforming to the standards of society. In groups of children such persons are usually considered under the common head of "problem children". Far too often we speak of children as "problem children" without adequate reason and without properly defining just what we mean. It is, never-the-less, true that there is a group of children who are "problems" in the manner of their conduct and mental processes, and who have problems of their own which need to be solved, and it is with these children that this thesis is concerned.

Social workers and psychiatrists have developed a technique by which they attempt to solve the problems of school children and of adults, and they are succeeding to a remarkable extent in aiding the individual to solve his problem for himself. Must the church worker in the field of Religious Education follow the same method as the social worker and the psychiatrist or is there a special method and a special technique by which

Religion may aid in the solving the problems of troubled personalities? If it were not true that religion is able to develop a special technique, it would be useless to go farther with this study but through the power of Religion can come such a peace of mind that problems may be overcome through a technique that does differ from that of the social worker and the psychiatrist. Religion has always been a source of solace, a retreat where the troubled personality may find a comfort and a calm which makes the problems or difficulties, or sorrows easier to solve or bear. All people are religious and if the Director of Religious Education or pastor in his work with children can develop that great religious instinct which lies deep within the lives of all people he can help to solve the problems and save those children among us who are problem cases from becoming, in adult life, persons who have acquired mental or social attitudes which set them apart from the normal group.

It is the task of religious education and the ministry to lead the youth of the world into a full and normal life, helping them to overcome difficulties and to solve problems as they develop in their growing lives. Through a study of the methods of the social worker and the psychiatrist we may hope

to discover what they do not have and what the Director of Religious Education or the pastor should have in dealing with problem children, and thereby develop a technique by which the Church and religion may help to solve the difficulties of "problem children" and thereby join them to the normal group.

-Part I-

In order to understand just what is to be considered it is always necessary to define debatable terms. Seldom are there more terms under debate than there are in this problem of the "problem child".

We are to deal with the relationship of Religious Education to the "Problem Child". First of all we must determine just what we mean by Religious Education for there are many varying definitions and many approaches to this field. Once we have determined what we mean by Religious Education and have stated a working philosophy we must then seek to discover what we mean by the "Problem Child". What constitutes "problem children"? Who is to be the judge of which children in our midst are "problem children"? and many other difficult questions. Once we have discovered in our thinking just what we mean by a "problem child" we must set a standard for the normal child. If we do not have a normal basis toward which to work and upon which to place our standards we cannot call any child a "problem child".

Religious Education is a directed process working toward an integrated personality. It is the [1]"direct process of helping

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[1]Soares, Theodore G.
Religious Education- Page XIV Introduction
University of Chicago Press 1928

people to develop progressively those habits, skills, attitudes, knowledge, appreciation, and ideals which will enable them at each stage of their progress to achieve a more integrated personality, and to live complete and satisfying lives in their physical environment and as co-operating members of an ungoing and improving human society." To become a co-operating member of a developing society one must not be onesided, but rather a full and complete life is desirable, and this cannot be attained simply through the physical and social side of life. The spiritual life of any individual is of importance in gaining a completely satisfying life. Religious Education must not only deal with the spiritual, however, but also with the physical and social since young people and children are naturally active. The spiritual element must come into their lives in order that they may be complete personalities. This spiritual force is fostered and developed by group worship in the home or in the Church School or Church and by leading the individual into a personal relationship with God and Jesus. It is doubtful whether any force in the life of an individual can so deeply influence his way of living as that spiritual force that comes with the earnest attempt to follow in the path of the Master and to hold daily communion with Him. Religious Education that can bring that sense of divine

guidance is filling its purpose and is at the same time helping the individual to a completely satisfying life, in an ongoing and improving human society. Thus we find that Religious Education must deal with the complete life of an individual and in dealing with the "problem child" must attempt to build for that child a complete and well balanced life.

[1]"Religious Education in the Christian sense includes all efforts and processes:

1. Which help to bring the children and adults into a vital and saving experience of God, as revealed in Jesus;

2. Which quicken in them the sense of God as a living reality, so that communication with Him in prayer and worship becomes the controlling factor in life;

3. Which enables them to interpret their growing experience of life in the light of ultimate values;

4. Which develop in them the habit of studying the Holy Scriptures as one of the chief means of sustaining and deepening their spiritual life; and

5. Which establishes in them attitudes and habits of Christ-like living in all human relations."

The "Problem Child" is the child who has acquired a set

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[1]Jerusalem Meeting of the International Missionary Council
Vol. II Religious Education page 148
International Missionary Council Publisher 1928

mental attitude of a type which is not common to the majority and thus sets him aside as different, or as a "problem". Many of the so-called problem children are simply cases of bad habits and when these habits are changed the difficulty is overcome and the child becomes a normal child.

To acquire a set undesirable mental attitude may be the result of some bad habit early in life which gives the child or adult a feeling of guilt, or of inferiority, or of injustice or emotional stress or some similiar undesirable feeling which leads to mental strain. This in turn becomes seemingly permanent and the individual acquires a set mental attitude. Can such cases be called true "problem cases"? While they last they are problem cases and it is therefore the task of religion and the Director of Religious Education or the pastor to help the individual to overcome those mental attitudes which form the basis upon which the difficulty rests. In contemplating the so-called problem child it must, however, be kept in mind that all children are either consciously or unconsciously challenging social institutions and standards set by society.

[1]"From the viewpoint of society human behavior is of two kinds:- that which conforms to group standards and is therefore

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[1]Blanchard, Phillis; and Paynter, R.H.
Changing the Child's Behavior. (Pamphlet)

socially acceptable, and that which deviates so far from these standards as to be socially unacceptable." Should the child's behavior be of such character as to place him in the socially unaccepted class he becomes what we call the problem child and we must seek to change his behavior, largely by changing his mental attitude, so that he conforms to the demands of the social group after which he is a normal individual.

When is a person normal?

[1]"No longer can the community be thought of as divided into two great classes, the normal and abnormal, the former at large functioning in society, the latter shut off by themselves and denied the ordinary activities of every-day life. But in terms of critical and scientific study it must be recognized that in the life of any individual so-called normal and abnormal trends are always blended. No two individuals are constituted alike. Moreover the individual is by no means constant in the amount of any one quality or characteristic he possesses, each of us is more despondent, or happy, or irritable, or facetious, or intelligent at sometimes than at others. Thus it is that the delineation of a normal person is a difficult task. It would involve first the enumeration and classification of human traits,

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[1]Blatz, Wm. E.; and Bott, Helen
Parents and the Pre-School Child page 254
Wm. Morrow and Company.

secondly, the devising of a scheme to measure those traits, and thirdly, the study of a sufficient number of people to find out the relationship between these traits and the degree to which they may be modified in the course of development. It is apparent that if an individual were found to be average in all traits he would be far from normal. The normal cannot as yet be defined otherwise than in terms of mathematical symbols. In lay language it simply means that the individual is normal who is like most other people with respect to traits under discussion."

In general no sharp distinction between normality and abnormality can be drawn. There is no rigid boundary but at best a fluctuating line which varies according to the criteria one adopts. The normal child is, therefore, the one who is like the great number of other children and yet is an individual differing in his many capacities from all others. In general he conforms to the standards of conduct as set forth by the majority of his kind.

-Part II-

In dealing with problem children one must realize that every case is different and that the method of approach and the solution to the problem of the individual cannot be identical with that of any other case. This is true because of the mental attitude of the individual under study.

However, in a general grouping there may be said to be three types of problem children. There are other ways of classifying them and of approaching the study but the following classification is one approach. There are those cases of mental deficiency which form one type; There are the psychopathic cases which no doubt form the largest body of any one type; and the third division is that type of problem child who becomes a problem child largely because of home environment. These are general classifications and each one of them includes many other types of cases such as, depressive type, psychoneurotic type, shut-in types, paranoid type and etc.

In the mentally deficient type we have two divisions. There are those individuals who are unable to conform to the usual routine of mental life which we are forced to class as feeble-minded, and in the second division are those who are not so markedly deficient in their mental make-up but who are below

the normal level, and who are classed as morons.

It is impossible to draw any clean-cut line between the various groups in the matter of intelligence. Each group gradually merges with the others. To be able to draw such a clean-cut line between the groups has been the goal of many tests but all have failed to achieve the goal. [1]"Dr. McFie Campbell reminds us that 'on one historical occasion a speech test was relied on as an infallible diagnostic criterion and that whoever could not pronounce the word 'snibboleth' satisfactorily was deemed an Ephraimite and was slain at the passage of the Jordan' and as Dr. Campbell adds: The victorious men of Gilead probably worried little over the fact that diagnostic mistakes may have occurred; the test gave such satisfaction, because it was easy to apply, took up little time, and gave a clean-cut answer which did not require further thinking." Since that day, however, men have progressed and now realize that no clean-cut line can be drawn in the matter of intelligence rating. The concept of mental age is based upon this: that comparison of individuals should be made in terms of the average development or attainment of children of various ages. For example; a boy of ten who can only pass mental tests which the general run of seven year old child-

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[1] O'Shea, M.V.
The Child: His Nature and His Needs page 73
The Children's Foundation 1924

ren are able to pass may be said to have the mental age of a seven year old or that he is retarded some three years. In such a case the child is mentally deficient but is not necessarily beyond aid.

Just what children are mentally deficient is hard to state. Some would include those who are merely backward or retarded children. Such cases are not usually mentally deficient but are simply suffering from some mental disorder which may be removed and allow them to take their place in the normal group. The mentally deficient child is one who, because of sub-normal mental endowment, is not able to adapt himself to the ordinary environment or to live independent of some external support and guidance. The group thus defined does not include the mentally deficient child who is nearly normal and who is known as the moron.

In the mentally deficient there are different degrees just as there are degrees in the normal and the superior intelligence. [1]"The Mental Deficiency Law of England defines the idiots as persons so defective in mind from birth as to be unable to guard themselves against common dangers. Imbeciles are persons in whose case there exists from birth mental defective-

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[1] O'Shea, M.V.
The Child: His Nature and His Need page 262
The Children's Foundation 1924

ness not amounting to idiocy, yet so pronounced that they are incapable of managing themselves or their affairs. And morons are defined as persons in whose case there exists from birth defectiveness not amounting to imbecility, yet so pronounced that they require care, supervision, and control for their own protection and for the protection of others, and appear to be permanently incapable of receiving proper benefit from intruction in ordinary schools." The child who is backward or dull is not a moron, but may be regarded as a definitely normal individual whose general alertness is simply below the normal average. He is organized along normal lines but is slow of wit and yet has much mental stability. He is able to make his way in the world by his own wit which is more than can be said for the moron.

The mentally deficient child is not a separate and peculiar species. He belongs to the human family and anything that religion can do for him is worth while. He may need a specialized educational procedure in order to gain a normal education, or if there is great deficiency such in those classed below the moron, he may be unable to advance educationally, but he can be taught through habit formation to care for his daily needs. Praise and encouragement form a large part in the education of the men-

tally deficient. Scolding does little good and usually does considerable harm by lessening the effort on the part of the individual in his attempt to learn.

Feebleminded cases which are extreme are beyond recovery and should be segregated. They should not be permitted to reproduce themselves, and in such cases sterilization is justifiable since the children of feebleminded parents inherit the mental deficiency. After segregating such cases it is important that they should be properly cared for and an attempt be made to educate them. Such cases are to be found in the state institutions where they are being cared for in the best possible way. Trained teachers and physicians attend them constantly. However, as far as educating them to become useful members of society it is an impossible task. They will never be able to take their place in the normal group.

In the moron mental deficiency is recognizable before the age of six years and the specialized training should begin at once. It is necessary to recognize at once that the deficient child will be slow to learn and that it is useless and ineffective to try to push him beyond his capacity to understand or learn. In the pre-school period great patience and tolerance

must be exercised because of the slowness in development along the lines which normal children rapidly pass, such as learning to walk, or habits of personal cleanliness. The defective child needs special care and special methods. He should not be constantly compared to the normal child since it only brings disappointment and vexation. Encouragement and tolerance are what are needed most of all.

The public school systems of our large cities have established special classes for the training of the mentally deficient child just as they have for the training of the mentally superior child. In such cases the classes are usually small, equipment expensive, and are taught by teachers who have been especially trained to teach these pupils. A great deal of individual attention is given to each pupil in an effort to give him a normal education. Special emphasis is given to physical motor elements of the program as well as to the academic subjects. The physical part of the program plays an important part in the education of the mentally deficient child since we can only develop his mind by organizing his behavior into habits of healthful and useful activity. The fundamental principle in the high grade mentally deficient child is to train him for some

vocation and help him to retain, under supervision some simple job.

Psychopathic Cases

It is probably true that psychopathic cases form the majority of problem children. These children are the ones who have some mental or nervous disturbance which sets them apart from the normal group. They are normal in most respects and can regain their normal standing if they are able to solve and remove the difficulty. It is with this group that a great deal of good may be accomplished by trained leaders and by religion.

The mild mental disorders which disturb the personalities of problem children are sometimes called some form of temporary insanity. It is not insanity but rather psychopathy or instability. Such children are easily recognized in most cases by the well-trained teacher or pastor. Such children usually do not get along well with other children and are apt to isolate themselves as much as possible. They are frequently destructive and are apt to have violent tempers. They usually have good memories but poor reasoning powers, are moody and easily depressed. They cannot be depended upon, they may promise but not keep the promise.

It is not necessary for any one individual to show all these symptons but any child with several of them should be carefully studied by someone who understands the problem. The psychopathic child may be looked upon as a "sick" child, and as one who may be made well again to enter his rightful place in society. If he is made well he becomes a normal individual but if he is made worse he may easily become insane.

There are many psychopathic cases of children who have mental problems. A common type of case is that of the child who is continually day-dreaming. [1]"A child may find infinite pleasure in dreaming of the wonderful things which he can do. He even thrills his companions into believing many of the stories he weaves about himself and his achievements. This, under control, is not bad." As long as it is under control and not indulged in to excess no harm results but in some cases the child comes to live in his dreams even during his adolescent years. It is when day-dreaming usurps the place of other mental activity in the adolescents to the degree where it becomes the master and the mental imagery controls the mind that it becomes dangerous and the individual is in danger of becoming a psycho-

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[1]Edited by Gruenberg
Guidance of Childhood and Youth page 52
Macmillan Company 1928

pathic case. A certain amount of day-dreaming is helpful and is probably responsible for some of the great music, poetry, and art of the world but it must not become the governing power of the personality. Day-dreaming in the child is not detrimental, if not in excess, but it is in adults and adolescents. It is the task of the pastor or Director of Religious Education to lead children suffering from this ailment gradually away from it and to teach them to face the actual circumstances of life and if possible to control the circumstances so that he may actually work out his purposes rather than simply dream about them.

Dementia Praecox is a psychopathic condition which is rather common. The causes of this condition are uncertain but are probably of mental origin. [1]"The mental diseases of this group arise in people of a 'shut in' character; those individuals who do not meet difficulties openly and frankly, who are inclined to be seclusive and have no one with whom they can talk over their conflicts or troubles. The chief manifestation of dementia praecox is a lack of coordination between the intellectual and emotional life of the patient." There are many

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[1]Morgan, John J.B.
The Psychology of the Unajusted School Child page 25
The Macmillan Company 1924

forms of dementia praecox. There are those cases known as hebephrenic dementia praecox, or the dementia praecox of the adolescent mind. [1]"The mental background of this group is clearly a sheer retreat from reality. The patient avoids any issue by a complete failure to respond to persons or situations. He removes his difficulty by ignoring it. He does nothing; therefore he makes no mistakes."

Other cases of dementia praecox are those known as catatonia, derived from the two Greek words, 'Kata' meaning down, and 'tonos' meaning tension. This is a mental conflict which seems to alternate between two attitudes of mind, at one time the patient may be very weak in his resistance to his difficulty, and again he may fight against it. Still another type is that of the paranoid dementia praecox. The characteristic feature of this disease is the belief of the patient that he is influenced by certain forces which are developing outside his own mind. He is not troubled with any attempt at consistency. If cornered he will ignore logic.

The teacher, pastor, or parent may be misled when he comes

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[1]Morgan, John J.B.
The Psychology of the Unajusted School Child page 129
The Macmillan Company 1924

in contact with a 'shut-in' individual. Since these persons pay little attention to the environment they have a negative type of virtue in that they are good because they never do anything noticeably wrong to get them in trouble. The difference between these cases and the cases of feeblemindedness is in the field of emotions. The shut-in person will not make an adequate emotional reaction. The introvertive type of personality is likely to be of the goody-goody type, he will seldom fight, is often of a seclusive disposition, takes little interest in the ordinary affairs of life, is likely to be careless about his person, and is very likely to have queer emotional reactions.

The thing to do in such cases is to keep the child from fleeing from the conflict of life. Teach him the joys of victory. Give him some simple and yet difficult situation and arrange affairs so that he will win, then congratulate him on the victory. Follow this with another and another until you have changed the mental attitude of the individual. This may be done by the pastor as well or better than by the social worker and psychiatrist.

Another of these psychopathic cases is the child who is

suffering from what Adler calls the "inferiority complex". This, however, he bases upon physical inferiorities and not upon mental conditions. That is, he makes his diagnosis depend upon stammering, ugliness, impotency, sex deformities and etc. These defects are associated with psychopathic traits and delinquency, but these traits are all dealing with organic inferiorities and so his theory is deficient. Children who are organically normal may also develop a feeling of inferiority through a desire for status, recognition, distinction, an 'unfair deal', and unfavorable comparison to some other member of the family, or some other similiar cause. Sex very often plays a large part in the feeling of inferiority. Alder says: [1]"The coordination of the inferiority of sexual apparatus with other organs-- inferiorities, though frequently only slightly developed, is never-the-less so often found to exist that I must maintain that there exists no organ-inferiorities without an accompanying defect in the sexual apparatus."

There are many elements which may bring about this feeling of inferiority some of which we have already recognized. Any treatment that deprives the child of the feeling of self-

[1]Thomas, Wm J., and Thomas, Dorothy S.
The Child in America page 464
Alfred A. Knopf 1928

respect or self-confidence may develop into an inferiority complex. Almost every neurotic has this feeling, a deep sense of inadequacy which is developed beyond reason, and which seems to paralyze all effort. In children this feeling of inferiority may simply be a feeling of dependency upon the parents and may be removed by changing the parental attitude toward them. The parent must begin to train the child in his early years if he would prevent maladjustment in adult life. The child must be allowed to progress from stage to stage of development and not be continually protected.

There is another group of problem children which cannot be classed as either mentally deficient or as psychopathic cases. In a sense they are psychopathic cases in that they may be returned to normal if properly dealt with. They are the children who become problem children largely because of home environment. The attitude of the parents toward the children, the cases of broken homes and foster parents, and in some cases where both parents are working and they have no time for their children. This is a type of problem children which may be considered separately and who need some real help.

[1]"The child's parents and near relatives will usually

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[1]Galloway, Thomas W.
Parenthood and Character Training of Children page 91
Methodist Book Concern 1927

have more to do with the forming of his character than all other outside agencies. The family influence is exerted through example and imitation; instruction, demands, approval, and disapproval; suggestions, persuasion; appeal to force, fear, love, gratitude, loyalty, duty, and etc.-----These are the forces which develop honesty, cooperation, courtesy, respect for rights of others, sense of responsibility, obedience, cheerfulness, fairness, a sense of humor---or their opposites. Parents can usually determine which." Thus the attitude and actions of the parents have a marked effect upon the child and are largely responsible for the environment in which the child will grow to adulthood.

Family situations tending toward maladjustment of individuals may be grouped in three general divisions. They are as follows:- Disabilities both mental and physical such as have been dealt with under mental deficiency; maladjustments such as are dealt with in the psychopathic cases; and environmental pressures such as may result from foster homes, broken homes, or economic pressure.

Each year great numbers of children are brought into foster homes by adoption, or by the re-marriage of one of the parents.

In the case of adoption there is less danger of a problem child developing than in the case of re-marriage of a parent. Under such conditions the child may attain the attitude that he is looked down upon, neglected, or opposed. He may be unfavorably compared to some other member of the family, overburdened with tasks beyond his capacities, or be forced into being an introvert by the attitude of the foster parent. Any of these elements may enter into the development of a problem child in a foster home.

On a few occasions a problem child may develop as a result of both parents being employed and leaving the child to care for himself as best he can. Such cases are not so frequent and are almost always the result of the child getting into the habit of keeping company with some older "gang" the members of which lead him into difficulties. If the child who has no parental supervision or companionship were given some worthwhile thing to keep him busy he would no longer be a problem child. The Church could reach many of this type through clubs, and other organizations which would keep the child busy while the parents are working.

Often there are problem children which develop as a result

of broken homes either where the parents are divorced or separated. Sometimes parents remain together "for the sake of the children" when the children would be better off if separation and divorce took place. Lack of harmony between parents, or excessive criticism of one or the other parent is sure to have its effect upon the child. He may develop a dislike for one parent and a marked attachment for the other or he may disregard the affections of his parents altogether, or he may be unfavorably compared with other children in the family and continually being made to feel outside the family circle or inferior to other members of the family.

Part III

-Religion and the Problem Child-

There are problem children in every Church School. Some have very minor problems which they will be able to overcome by the natural process of growth, while others need the help and friendship of their pastor or Director of Religion Education. Just what may be done for the child is a problem that each pastor must work out for himself depending upon the nature of the difficulty and the personality of the child. Every personality is different and the method to be used must be fitted to the individual. However, in general the pastor or Director of Religious Education when working with the problem children of his Church School will follow much the same lines of procedure as those used by the psychiatrist and the visiting teacher. These methods are best known for finding the basis upon which the problem rests. Once the cause of the difficulty is discovered comes the question of just what religion can do to help solve the problem and rebuild the individual into a normal being which the social worker or psychiatrist fails to do. The psychiatrist is a medical doctor and the visiting teacher works with the public schools. Religion is not the primary interest of either and yet many cases can be cured through the

influence of religion working in the life of the individual. Often we fail to use a great remedy for the cure of troubled personalities when we ignore the forces of religion.

It will be well to note here the method of procedure by which the psychiatrist discovers the cause of the difficulty and the steps he takes to remove the cause and return the problem child to the normal group. In the psychiatric examination of a child the success of the examination will depend largely on the child's reaction to the examiner and his notion of the examiner's attitude toward him. Children are frequently prejudiced or intimidated by what they hear about a clinic and imagine that the psychiatrist is an arm of the law or of the school discipline, and as a result build up a defense against all approaches. Here the Director of Religious Education or the pastor have an advantage since at the very beginning he approaches the child as a friend and the child looks upon him as a friend.

It is necessary for the psychiatrist to guard against the possibility of giving the child the impression that he is investigating his misbehavior or delinquencies. Here again the Director of Religious Education or the pastor has the advantage for he is already familiar with the difficulty as it has risen in

the worship service or the classroom or club room and the child understands that he knows all about him and so the approach is made more easily on mutual grounds. An attempt to get the child to confess a series of faults to an entire stranger would prove fatal to the case study and the psychiatrist realizing this attempts to overcome it by taking as much for granted as possible and not asking the child to confess. [1] "The main emphasis is put on the real psychiatric issue of how the child feels about the conditions to which he does not adjust, what elements in the situation effect him most, what responsibility he assumes for his difficulties, and what he himself thinks would straighten out his entanglements." The form of the examination is molded as much as possible to the peculiarities of the individual case. It is important to know how conscious the child is of his difficulty before making a study of his problem, his home life, school or street life. The psychiatrist attempts to learn where the child places the responsibility, how he feels about his weakness, and what he seeks to accomplish by misbehavior. The psychiatrist seeks to discuss, with the child, in an intimate way the difficulty that troubles him. He tries to do this in a way so that the individual will

[1] Psychiatric Examination of a Child page 2 (Pamphlet) National Committee for Mental Hygiene, N.Y. 1926

feel that he is discussing his problem with him and from his point of view.

One of the most important lines of inquiry, by the psychiatrist and anyone dealing with problem children, is in the field of family realtionships. The general social history as revealed by the conversation with the child will no doubt shed light upon a family situation which may be investigated. There may be a step-parent, a problem of discipline, too much love, brighter brothers or sisters, a younger child who has suplanted him, or any one of many more possibilities. The psychiatrist learns all this in an attempt to discover the cause of the problem. All the time the psychiatrist is talking with the problem individual he is attempting to learn his difficulty and at the same time to get the individual to realize the attitude of other members of the family or society and draw him out in a free expression of his feelings. He tries to make the individual feel that as much attention will be given to his side of the story as to that of the adults.

The second important line of inquiry of the psychiatrist is that of school relationships. Whether the individual likes school, when and for what reason he dislikes it, what studies

he likes or dislikes, whether he likes his teachers, whether he is conscious of his mental abilities or disabilities, whether he likes his playmates, are some of the lines of inquiry in the school life.

Another field of inquiry by the psychiatrist is in the realm of habits. He strives to learn whether the individual has been shamed or frightened by adults anxious to cure him of some habit such as enuresis or masturbation or the like. Some one of these habits may be the cause of his problem.

Inquiry is also made into the individual's dream life, his social relationships and his attitude toward the opposite sex and his sex practices and knowledge. This is primarily a study of his emotional life and it is very often here that the cause of the difficulty is found. This is especially true in cases of delinquency.

After such a study the psychiatrist can give briefly an estimate of the child's motivating mechanisms, the degree of his insight, his resources for adjustment, and remediable difficulties in the environment but he offers nothing along the spiritual line which will steady the child in his progress back

to the normal. Since, however, the pastor or Director of Religious Education must follow much the same line of procedure, only carry it further, it will be of value to outline the examination of a problem child as an example.

The chief purpose of an examination is to obtain as intimate an understanding as possible of the child's own thoughts and feelings about himself and the situation that confronts him. The aim should be to grasp his point of view and to understand his attitudes.

-Outline for Examination-

[1]"Play life and other interests:
Does he prefer to play by himself or with others?
What type of play--active or passive games?
What other interest than those usually considered play?
Is he a leader among his playmates?
Does he earn any money--what does he do with it?
What work does he do at home?

Dream life:
Of what does he dream? Tell dream in detail.
Does his dream life suggest dominance by emotional conflict or disturbance of any kind?
Does he day-dream? What about? Any nightmares or sleepwalking?

Fears and Emotional conflicts:
Of what is he afraid? Describe in detail origin and character.
What is his attitude toward sex matters? Any repression or conflicts?
Are there any indications of feeling of inferiority?
Attitudes toward situations or persons, and enuresis, masturbation, stuttering, and etc.

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[1]The Psychiatric Examination of a Child page 305-306
The National Committee for Mental Hygiene, N.Y. 1926

Attitude toward body:
Any complaints? What? How long? Describe fully.
Ever faint or feel dizzy?
What is his attitude or interest toward bodily functions and personal hygiene?
What are his habits of eating and sleeping?

Attitude toward School:
Does he believe that he gets along well or poorly in school? Why?
Does he like school? If not, why?
What is his feeling toward his teachers? Classmates?
What are his scholastic ambitions?

Attitude toward Companions:
Is he a "good scrapper"? How does he get along with his companions?
Does he get angry, does he feel that tney tease him?
What does he think about his companions, are tney good or bad?
Has he learned bad words from tnem?
Does he prefer companions of the same or opposite sexes?
Has he special chums? What do they talk about?

Attitude toward family situations:
Is he punished or teased much at home? Does he deserve it?
Does he like best his father or mother? Why?
Does he feel that he or another child is the favorite?
What are his feelings toward his brothers and sisters?
Are there any other relatives he likes or dislikes?

Attitude toward misconduct or bad habits:
What has he to say about his difficulties?
Try to get him to tell the beginnings of his offenses, habits and etc., and give details as to his first experience in lying, stealing or sex experiences.
Is there anything in his life which serves to explain his bad conduct?
Is he defensive, honest, etc?

Attitude during interview:
What special attitude or reaction during examination?
Attitude toward examiner?
Is he self conscious, ill at ease, restless, flighty?

Does he flush easily?
Is he boastful?
Is he indifferent?
Does he enter into the spirit of the occasion?"

Such an outline may be used as a general basis upon which the pastor, Director of Religious Education or visiting teacher may work as well as the psychiatrist.

The technique of the visiting teacher must vary just as that of the psychiatrist. Much depends upon the school and the type of teacher who is teaching in the school. [1] "The methods of treatment used by the visiting teachers to bring about better conditions for the children whom they serve are shown by further analysis of case records. The actions taken are grouped under four headings: (1) "in school"; (2) "in the home"; (3) "with the child"; and (4) "through outside agencies"."

Action taken through outside agencies is especially large in the work of the visiting teacher. She helps to remedy physical defects, secure financial relief for families, secure outings for children during the summer months, and etc. The visiting teacher, in her school work, secures the transfer of problem children to open air classes, to ungraded classes, rapid promotion classes, or other special groups. She also tries to change

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[1] Oppenheimer, J.J.
The Visiting Teacher Movement page 108
Joint Committee on Methods of Preventing Delinquency, N.Y. 1925

the attitude of the teacher, if necessary, as well as that of the child. The visiting teacher is working both in the field of education and social welfare and therefore has a varied interest.

The duties of a visiting teacher are difficult to state since they do vary so widely. She must always work in cooperation with the psychiatrist, if there is one on the staff of the school. She is employed to handle problem children of all types as referred to her by the various teachers. There are also usually some administrative responsibilities that are taken by the visiting teacher such as checking up on tardiness or request to leave school early. Another duty of the visiting teacher is to study the family conditions of problem children and financial problems that confront the parents. They are also asked to make special surveys and carry out such projects as night schools, clothing sales, work with foreign-born parents and etc.

It is the aim of the visiting teacher always to solve the problem of the individual with whom she is working and so return him to the normal group, but she, as the psychiatrist, has little to do with religion and generally limits her efforts to the educational field rather than to spiritual development. Is there

not a great undercurrent of spiritual power that is not being touched by these individuals which the pastor and Director of Religious Education may yet tap and use in their building of Christian character.

The problem child in the Church School may find just the contacts which he needs to solve his problems in the worship of the department, in the fellowship, of the classroom, in participating in a religious drama, or in some Christian service project. It is along these lines that the field of religion may lead a problem child to turn his efforts and in so doing he may come to express a higher self and develop a more perfect personality. He will forget himself in the worship of a great ideal because others are worshipping the same ideal, or he will build up a resistance to an old difficulty by fellowship in some Christian project. It is a well known fact that in dramatics, when entered into with real devotion, the characters live their parts. If a problem boy is playing the part of a loved disciple in a Christian play that part cannot fail to make an impression upon his inner life. He will have strengthened his control over the lower elements in his life and will at the same time have entered into Christian fellowship with his group. Drama is one of the strong-holds of religion.

The worship experience as carried on in the department may help an individual to overcome his problems by its spirit of reverence. It may be noted there is seldom any difficulty with the problem child who is constantly raising a disturbance if the leader can create an attitude of group worship. It is only when attention slips and everyone becomes restless that the disturber becomes evident. Worship in a group tends to quiet the human spirit and give a sense of awe and reverence. After reverence and worship comes a feeling of peace and confidence which help to overcome the troubles of a disturbed personality. Worship and reverence will no doubt help the adolescent far more than it will help the Junior or Primary.

The fellowship of the classroom under the leadership of a skilled teacher may be of great benefit to the child who is struggling with some problem. He may be helped by the fellowship of the group if they accept him as one of them, or by the discussion of the class which may reveal to him the normal path, or by the friendship and example of his teacher. The class may enter upon some service project which will create in him a new interest and so lead him away from the cause of his trouble. To keep the mind active and the body busy in the service of others or of some worthy cause will do much to relieve the usual causes of

problems in children.

The school may touch the school life, the home life, and the play life of the child. The psychiatrist may study the case history and remove the cause of the problem, but neither the school nor the psychiatrist touch the inner spiritual life of the child. The emotional life of the child is interwoven closely with his religious life and through this channel I believe that a more lasting and complete remedy may be brought about if religion and its power is added to the resources of the psychiatrist and the visiting teacher.

What can religion do for the problem child who is mentally deficient? There is, it is true, little that can be done for cases of extreme mental deficiency. Even religion cannot reach those who have no mind but in the case of the moron or the backward child there are certain things religion can do for the individual.

The first thing for a Director of Religious Education or a Pastor to do when he finds one of his Church School members who seems to be mentally deficient is to make a careful study of the case history and definitely determine whether the child is mentally deficient or whether he is suffering from some form

other cause, repression, or physical defect. A perfectly normal child may be thought to mentally deficient. In order to determine whether the child is mentally deficient it will be necessary to work in cooperation with the school and with the parents if possible. The school can help the most in such cases since the parents will defend the child or try to hide his deficiency.

If the Director or Pastor is fitted to give mental tests he will be able to determine with some degree of accuracy the mental age of a child. The Binet tests, in France, were among the first to be constructed with the idea of determing mental age. In America the work of testing intelligence has been carried on by Professor Lewis Terman of Stanford University. The success of mental tests depends upon many things and should not be used as the sole criterian for judging whether or not a child is mentally deficient.

Along with the giving of mental tests the Director of Religious Education or the pastor should have numerous conversations with the child in the relationship of Pastor-friend with Church-School-friend. There should be no note of authority or of punishment but rather the note of good comradeship and friendly interest. Ministers are in a much better position to become unprejudiced and interested friends than is the psychiatrist or

the school teacher. He is in more of a position of trust and confidence. From his conversations with the child he will be able to determine whether he responds normally or subnormally.

Also in his conversations and friendship with the child, especially if he is in early or middle adolescent stages, the minister should try to lead the child to a personal devotional life. It is not so imortant in early years but at the adolescent period children become young people and break away from home ties with the realization that they are individuals and need not depend upon parents and home. They dislike authority and rebel against earlier ties. It is then that they face the world and feel lost and need something to tie their lives to until they pass the danger stage. This is true of all youth and especially true of those who are not quite normal in their mentally. A personal devotional life will help to hold them steady and give them courage to meet the problems of life.

After the Director of Religious Education or the Pastor has done all he can to determine whether or not the child is really mentally deficient there is only one more thing to do in case of doubt. Call in the medical authorities and work in cooperation with the Doctor. He, with his special knowledge and training can advise. If it is a case of extreme deficiency it is best to elimi-

nate the child from the normal group and send him to an institution, otherwise do all that is possible in the light of case study, and school and psychiatric cooperation to help the child to hold his place in society.

Religion has a great task and a rewarding task in working with those individuals who are suffering from some form of psychopathy. In such cases it is also necessary to make a careful study of the case history and try to discover the cause of the disorder. Psychopathic cases rise from so many causes that it is necessary to be careful to discover, in many cases, the precise detail which started the patient on the road to some form of psychopathy.

To discover the cause is sometimes the hardest task but it can best be found through the working out of the personal counseling system. Personal counseling touches the intimate parts of a person's soul, it creates friendship and a new insight into the problems of life. It is through personal counseling that a problem child may come to confide in his minister and as a result of help given may come to face life in a more confident and happy mood. Counseling aims to get the individual to see his own difficulties and to take steps to overcome them.

We may consider the following six assumptions as essential to counseling:

[1]"(1) Education is a process where the capacity of the individual is stimulated by the experiential method, so that he achieves the highest personal development in harmony with the program of his social group.

(2) The personality of each individual must be considered.

(3) All individuals are the products of their innate tendencies and the responses that they have made and are making to their environment. This makes necessary the understanding of the individual's capacities and previous experiences. The counselor is successful to the degree that he aids the counselee in having an expanding experience which comes from sharing the process of inquiry and results in creative expression in place of authoritative repression.

(4) The counselee must be aroused to see what is involved in his problem, and marshall his resources to meet it. Counseling does not mean solving problems for people but rather helping them to see how they may find the solution.

(5) The counselor should remove his support as soon as possible. It is in this way that the counselee may come to live a life of mastery instead of one of evasion or substitution.

(6) It is of religious significance, for it involves an adjustment to a purposeful universe if one believes that personality is of supreme value."

In the final analysis, the success of the personal counseling system as carried on by the Director of Religious Education or the pastor or the Sunday School teacher, scout leader, club

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[1]Coffman, H.C.
The Underlying Assumptions of Counseling.
Religious Education, October 1930

leader or any other member of the church school staff, will depend upon the motive as well as the skill and tact of the one doing the counseling and the response of the counselee. By motive is meant the activity which the counselor indirectly sets in process as a result of the counseling procedure, and toward which he has been leading during his counseling. Counseling is not the adjusting of the individual to a situation, necessaryily, it may be the changing of the situation instead of the individual. The individual may be brought from an environment of slums and immoral gang life into a Christian environment through change of companions and habits. The pastor or Director should attempt to make a devotional Christian life adjustment the foundation upon which he rests his counseling.

In all personal counseling the maladjusted child is studied from the point of view of the physical, mental, emotional, and social, and the minister should add religious. Efficient counseling requires a high capacity on the part of the counselor for dispassionate and objective detachment. He must not allow his own emotion to be identified with the emotions of the person whom he is trying to guide. The minister, who often is not especially fitted to be a counselor, may often unconsciously allow

his own interests and emotions to color his attitude toward the maladjusted child. He should guard against this in order to gain the most satisfactory results.

The modern minister must play the part of both preacher and social worker. Cases of home difficulties and problem children are constantly being brought to his attention. The average minister or director, when he is faced with such a problem usually dismisses it with as little effort as possible because he is timid about analyzing the problem involved. He often feels that he is not at liberty to go outside his own congregation for aid from more expert and specialized workers. The minister's library contains little or no material on the technique of personal adjustment and he does not feel suited because of the lack of training. Case work is usually left entirely to social welfare workers. He is too occupied with other ministerial duties to become engaged in case studies. All of these are true in the life of the average minister out it is time that adequate training should be given to make it possible for the minister to meet the personality adjustmnet problems of his people. However, the enterprising and wide awake minister can handle the problems and can obtain the necessary books and information to make his work efficient.

It is through the minister's friendship and personal contacts that he can bring the greatest influence to bear on the individual's inner or spiritual life. Worship is instinctive with all persons whether they are normal or abnormal. It is the artificial type of worship that is ineffective. If an individual can open his soul to true communion with God through a personal devotion to Christ he will be at the heart of worship. It is in personal prayer and personal worship of God, through music, prayer, or a sunset that brings peace to the soul and creates a feeling of calm and confidence. The minister should seek to lead his problem case along these lines if he would have religion do its work in bringing the unadjusted individual back to normal.

The Pastor must remember that each individual with whom he works has a different personality and a different problem and so he must attempt to fit his approach to the individual's personality and difficulty. To one individual private devotions may lead him to a happier and better adjusted view of life, with another the minister may teach the meaning of cooperate worship and intimate fellowship with others in worship. He must remember that in all cases prayer clears the mind of many troubles and

lifts a weight from the soul. The individual under study will in many cases need to be taught the meaning of prayer and the way to pray.

The majority of cases which come to the attention of the Director of Religious Education or to the pastor will have to do with some home situation. Such individuals might easily be considered among the psychopathic cases but to the field of religion they are important enough to study alone. Such individuals may be called cases which result from home environment and since the minister deals primarily with the family they will be considered separately.

[1]"Unstable homes are the raw material of every case-worker's job, whether we come across them in a legal-aid society, a family agency, the child-caring field, the juvenile court, or a child-guidance clinic. (or a Church School). An unstable home situation includes, but goes beyond, the limits of a broken home. In fact, many an unbroken home menaces the normal development of personality in equal degree and in the same manner--i.e., by tearing down the child's feeling of security.------." Thus we see the importance of home environment on the growing child. [2]"Probably

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[1]Neumann, Frederika
The Effects on the Child of an Unstable Home Situation (Pamphlet
National Committee for Mental Hygiene, N.Y. 1928 page 1)
2. Lee, Porter R., and Kenworthy, M.E.
Mental Hygiene and Social Work page 61ff
Commonwealth Fund, N.Y.
Division of Publication 1929

problem children come more often from broken homes or from families in which one or more of the children are there by adoption."

In any case involving the home situation and other members of the family it is first of all, as always, necessary to make as careful a study of the case history as to how the difficulty started, the progress of the difficulty, the habits formed, the preventive measures taken and etc. This will often be difficult and sometimes impossible because of non-cooperation on the part of the family and parents.

There are many things which parents do which have an ill effect upon their children. When parents deal arbitrarily with their children and there is a constant state of irritability in the home, the children will grow up not knowing what to expect either in the home or in the community. The attitude of the child toward the community is the result of his training at home. Frequent demonstrations of loss of temper, constant nagging, autocratic authority, or emotional outbursts all have their effect upon the child and help in the making of problem children of later years. [1] "Parental handicaps due to mental defects, poor practical judgment, over-solicitude, unwarranted ambitions, self-

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[1] Thom, Douglas A.
Parental Guidance
Mental Hygiene Pamphlet 1928
State Department of Mental Hygiene, New York.

centeredness, quick temper, rigid discipline, lack of sympathy, chronic invalidism, and a cold and forbidding attitude toward the child, all play an important part in parent-child relationships. If the personalities of parents are adequate, by virtue of their intellectual defect, or their outlook on life has become twisted and warped through emotional disturbances, it is not suprising that their discipline be reflected in the personality of the child."

After the source of the trouble has been discovered through a study of the case history the next thing for the minister to do is to try to make such adjustments in the family environment as he can to better conditions or to change the attitude of the parents if that is necessary. The parent who is truly interested in cooperating with the minister or Director of Religious Education in an attempt to solve his child's difficulty may be guided in changing his own attitude toward and relations with the child and with other members in his immediate environment. The parent can more easily adjust his environment than can the child and it is the parent who is more largely responsible for the environment than the child. The r al essentials to a home environment for which the minister should work are peace and harmony among

the adults; an atmosphere of cheerful industry and a clear-sightedness on the part of the parents toward the problems of their children; and the practice of family devotions and connection with the Church organization. If the minister can help the family to create such an environment he will have gone far toward solving of the problem of the problem child.

In such a relationship of parents and child as described above religion and the Church worship will play a part. If religion is a vital part of the lives of the parents it is with little difficulty that the children are persuaded to join in some phase of the life of the Church. Once the entire family worship together and attain the attitude of true worship, the harmony of the home will be assured.

-Conclusion-

In conclusion we must recognize that nothing can be done but to eliminate the mentally deficient from the field of Religious Education since they are usually under medical care and in an institution. It is only occasionally that one is found in the Church School. The moron is more often found and should be dealt with in the Church School as efficiently and as scientifically as possible. In order to do this the Director of Religious Education and the pastor must be trained in the field of case work and psychiatry.

The entire thesis has been built around the director and the pastor largely because there are seldom others among the staff who are sufficiently trained to handle the work. If a Church is fortunate enough to have employed in their staff of workers a trained psychiatrist much of the burden of case study and treatment of the maladjusted individual may be shifted from the shoulders of the pastor or director. Scout leaders, teachers, club leaders, play directors and other members have their portion to contribute and may in some cases handle the whole problem, but the minister must be the guiding hand behind the program of adjustment.

In the field of religion it is necessary that everything be done that may possibly help to change a wrong environment of the maladjusted children. The Director of Religious Education or the Pastor is usually in close contact with the home life of the family attending church and is therefore in a position to understand and deal with the home environment. The Church deals primarily with the family as a unit and may more easily get into the inner circle of the family than any other institution, and therefore has a better opportunity to serve.

Often the Church program may be used as a preventive of maladjustment among children by the promotion of interesting activities which will give the children some worthwhile occupations and activities. The program of Religious Education must extend beyond the worship experience and include all activities which help in the building of happy fellowship in Christian experience. Christian service projects in the community, foreign mission projects, scout clubs, and nature clubs are helpful. A social program that will give healthful, clean, and Christian fellowship should be used to prevent maladjustment among the children of the Church School.

To treat the maladjusted child properly will require the

cooperation of the home and the parents. This may require some parental education which the minister or Director should undertake through conversation, suggested reading, conferences with special authorities such as psychiatrists and doctors, clinical advise, and parental guidance classes. The maladjusted child may be re-adjusted only as he is in a wholesome environment. Parental education should be continueus and the pastor should be responsible for making it a continuous progress.

In order to educate others and guide them in their treatment of and attitudes toward their children it is necessary that the leadership be well trained. The pastor or director who undertakes such a course of action should himself be well trained and have at his command sufficient materials for guiding others. His library should not only be stocked with critical commentaries and Bible dictionaries but should also have books dealing with such subjects as mental hygiene, psychiatry, character formation, parental education, sex, abnormal psychology, and other similiar subjects.

In trying to help the mentally deficient, or psychopathic child the pastor must, if he is to be scientific in his procedure, follow the same methods as those used by the psychiatrist

in his case study. The pastor will make use of the personal counseling system and add to it the fellowship and devotion of the Christian religion. He will be scientific and use every method known to science and education and yet he will always remember that religion plays a part in the lives of all individuals.

Maladjustment in the majority of cases is temporary and if the cause can be found and the difficulty removed the individual can take his place in the normal group. Psychiatrist and visiting teacher may find the cause of the difficulty and remove it. The minister or Director of Religious Education, or any one on the Church School staff who can do the same but go beyond and lead the maladjusted individual not only into the normal group but also help that individual to have a vital religious experience, is accomplishing more for the good of the social group and the church than the psychiatrist or the visiting teacher.

End of

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